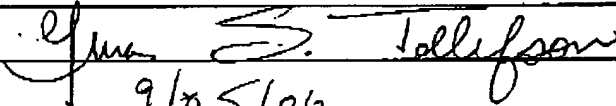
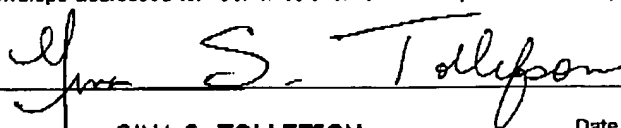


SEP 05 2006

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/810,429
		Filing Date	March 29, 2004
		First Named Inventor	Jacob Allen
		Art Unit	2129
		Examiner Name	Peter D. Coughlan
Total Number of Pages in this Submission	3	Attorney Docket Number	AFD 668

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to a Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Request for Statutory Invention Registration
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT		
Firm or Individual Name	GINA S. TOLLEFSON	
Signature		
Date	9/05/06	

CERTIFICATE OF TRANSMISSION / MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		
Typed or printed name	GINA S. TOLLEFSON	Date 5 Sep 06

Request for Statutory Invention Registration**RECEIVED
CENTRAL FAX CENTER**Application Number 10/810,429 , or ☐ attached hereto**SEP 05 2006**Filed: March 29, 2004Title: MODULAR DIGITAL, STOCHASTIC NEURAL NETWORK ARCHITECTUREApplicant(s): Jacob Allen et al.

A. In the above identified patent application, I hereby:

1. Request and authorize the Director of Patent and Trademark Office to publish the above identified regularly filed patent application as a Statutory Invention Registration. (35 U.S.C. 157)
2. Waive the right to receive a United States patent on the same invention claimed in the above-identified patent application. These rights, which are waived, include those specified in 35 U.S.C. 183 and 271 through 289 as well as all attributes specified for patents in any other provisions of law other than title 35, United States Code. The waiver includes, but is not limited to, the remedies under 19 U.S.C. 1337 and 1337a, 22 U.S.C. 2356 and 28 U.S.C. 1498. (35 U.S.C. 157(c))
3. Understand that the above waiver will be effective pursuant to 37 CFR 1.293 upon publication of the Statutory Invention Registration to waive the inventor's right to receive a United States patent on the invention claimed in the Statutory Invention Registration. (37 CFR 1.293(b)(1))
4. State that, in my opinion, the disclosure and claims of the above-identified patent application meet the requirements of 35 U.S.C. 112. (37 CFR 1.293(b)(3))
5. State that, in my opinion, the above identified patent application complies with the requirements for printing as set forth in the Rules of Practice for Patent Cases, 37 CFR Part 1. (37 CFR 1.293(b)(4))
6. Enclose the fee set forth in 37 CFR 1.17(n) or (o) for requesting publication of a Statutory Invention Registration:

☐ A first Office Action has not been mailed in the above application, 37 CFR 1.17(n) \$ 920.00
☒ A first Office Action has been mailed in the above application, 37 CFR 1.17(o) \$ 1840.00
Request fee \$ 1840.00

MINUS BASIC FILING FEE, IF PREVIOUSLY PAID

- ☒ Basic filing fee for utility patent application set forth in 37 CFR 1.16(a);
☐ Basic filing fee for design patent application set forth in 37 CFR 1.16(f); or
☐ Basic filing fee for plant patent application set forth in 37 CFR 1.16(g)
Minus basic filing fee \$ 770.00

Amount due \$ 1070.00

Payment charged to credit card _____ . Form PTO-2038 is attached.

Amount enclosed by check or money order _____ .

Please charge Deposit Account No. AF 01-0465 the amount of \$ 1070.00 .If payment of any additional fee is required for the publication of the Statutory Invention Registration, charge such amount to Deposit Account No. AF 01-0465 .

- B. For printing of the Statutory Invention Registration front page, if desired, list below the name(s) of not more than 3 registered patent attorneys and agents OR alternatively, the name of a firm having as a member a registered patent attorney or agent. If no name is listed below, no name will be printed on the Statutory Invention Registration.

AFMCLO/JAZ, Gina S. Tollefson

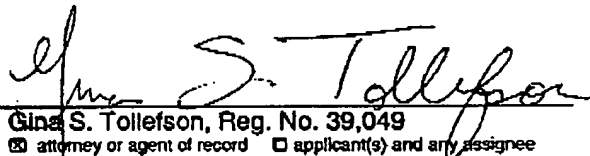
- C. Name of assignee, if any, for printing on the Statutory Invention Registration

Government of the United States of America as represented by the Secretary of the Air Force

Address (City and State or Country) Wright-Patterson Air Force Base, OH

State of incorporation, if assignee is a corporation

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.


Gina S. Tollefson, Reg. No. 39,049
☒ attorney or agent of record ☐ applicant(s) and any assignee